

7  
Work Order ID 125677

\*125677\*

Monday, October 20, 2014 10:58:58 AM

Page 1

Item ID: D407-667-205TRN

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Turning Detail

Start Date: 10/20/2014 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 10/20/2014 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 14-10-20

Tooling:

Date:

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N):

Date:

Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
|----------|--------------|

|              |       |
|--------------|-------|
| D407-667-245 | Rev F |
|--------------|-------|

100

\*100\*

Mori Seiki

Mori Seiki CNC Lathe Large

MORI SEIKI CNC LATHE LARGE

Memo

1-Fill tube with sand & install plugs D407-667-245 on both ends as per Folio FA248

2-Turn first side as per Folio FA248

3-Blend transition lines only, \*\*do not sand whole tube\*\*

FOLIO REV: FA

DWG REV: F

\*Use mill bastard file, brush file repeatedly with file card.

\*Do not use sandpaper coarser than 320 grit.

SCRAP

1 6  
argml  
14/10/27

110

\*110\*

QC

Quality Control

QC1- Inspect dimensions to dimension sheet

0.00

Memo

0.00

1 6  
argml  
14/10/27

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Work Order ID 125677**

Monday, October 20, 2014 10:58:58 AM

**\*125677\***

Page 2

Item ID: D407-667-205TRN

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Crosstube Turning Detail

Stop **\*NS2\***

Start Date: 10/20/2014 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/20/2014 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***  
Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

120

**\*120\***

Mori Seiki

Mori Seiki CNC Lathe Large

MORI SEIKI CNC LATHE LARGE

0.00

**Memo**

0.00

1-Turn second side as per Folio FA248

2-Blend transition lines only, \*\*do not sand whole tube\*\*:

\*Use mill bastard file, brush file repeatedly with file card.

\*Do not use sandpaper coarser than 320 grit.

FOLIO REV: 7/1DWG REV: 7

3-Remove sand and plugs

4-Scribe part # and batch # using vibrating stylus as per Dwg D407-667-245

*mmL*  
*14/10/28*

130

**\*130\***

QC

Quality Control

QC1- Inspect dimensions to dimension sheet

0.00

**Memo**

0.00

*mmL*

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><br><input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Work Order ID 125677****\*125677\***

Page 3

Item ID: D407-667-205TRN

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Crosstube Turning Detail

Start Date: 10/20/2014 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/20/2014 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

140 QC8- Inspect parts - second check 0.00

**\*140\***

QC

Memo

0.00

Quality Control

**P.T.O.**

145 0.00

**\*145\***

Crosstubes

Memo

0.00

Crosstubes

Grind off circumferential machining marks longitudinally.

150 0.00

**\*150\***

HandFXtube

Memo

0.00

Hand Finishing Crosstubes

1- PRESSURE WASH X-TUBE INSIDE AND OUT

2- ACID ETCH X-TUBE INSIDE AND OUT. USE RED SCOTCH BRITE

DQA:

Date: 15/07/09

QA Closed: ~~PRM~~

Date: 15/07/05

## WORK ORDER NON-CONFORMANCE / UPDATE

Work Order update only ☐

|                                 |                                                                                                                                                                                           |                                        |                                               |                                              |                                      |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------|----------------------------------------------|--------------------------------------|
| Work Order: <u>125677</u>       | <b>DISPOSITION</b><br>Rework <input type="checkbox"/><br>Scrap <input checked="" type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b>      |                                               |                                              |                                      |
| Part No. <u>D407-667-205TNR</u> |                                                                                                                                                                                           | Skid-tube <input type="checkbox"/>     | Crosstube <input checked="" type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |
| NCR No. <u>15-5168</u>          |                                                                                                                                                                                           | Machining <input type="checkbox"/>     | Small Fab <input type="checkbox"/>            | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |
|                                 |                                                                                                                                                                                           | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/>            | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |
|                                 |                                                                                                                                                                                           | Large Fab <input type="checkbox"/>     | Composite <input type="checkbox"/>            | Supplier <input type="checkbox"/>            |                                      |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description                     | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|----------------------------------------|-------------|--------------|--------------|
| Design        |      |      |     | Chatter marks Found                                 | A.P.              | RECOMMEND SCRAP                        |             |              |              |
| Doc/Data      |      |      |     | 20" to 10" from bottom                              | 15.06.25          | DAMAGE TOO DEEP.                       | 15.6.25     | DAS 9 9-89   | DAS 9 9-89   |
| Equip/Tooling |      |      |     | of Crosstube.                                       |                   | RE-WORK WOULD REMOVE TOO MUCH MATERIAL |             |              |              |
| Handling/Pre  |      |      |     | Dimension 1.838" is 1.846"                          |                   | 1136 \$                                |             |              |              |
| Material      |      |      |     | and Dimension 1.892 is 1.886                        |                   |                                        | DAS 49 9-89 | 15.06.25     | 15.06.25     |
| Operator      |      |      |     | P.C. Chatter mark in material.                      |                   |                                        | 15/06/25    |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                                        |             |              |              |
| Process       |      |      |     |                                                     |                   |                                        |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                                        |             |              |              |
| Training      |      |      |     |                                                     |                   |                                        |             |              |              |
| Transport     |      |      |     |                                                     |                   |                                        |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                                        |             |              |              |

## FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input checked="" type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Monday, October 20, 2014 10:58:58 AM

**\*125677\***

Page 4

**Accept**

**\*N900040100\***

Setup Start \*NS1\*

Stop \*NS2\*

**Item Name:** Crosstube Turning Detail

**Start Date:** 10/20/2014    **Start Qty:** 1.00    **\*1\***

**Cust Item ID:**

**Required Date:** 10/20/2014    **Req'd Qty:** 1.00    **\* 1 \***

**Customer:**

**Reference:**

**Approvals:**      **Process Plan:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tooling:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

160

QC5- Inspect part completeness to step on W/O

0.00

**\*160\***

QC

## Memo

0.00

## Quality Control

170

0.00

**\*170\***

## Packaging

### Packaging

## Memo

0.00

### Packaging

**Identify and stock in kanban rack**Location:

180

QC21- Final Inspection - Work Order Release

0.00

**\*180\***

QC

## Memo

0.00

## Quality Control

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



# Picklist Print

Monday, October 20, 2014 10:59:05 AM

Page 1

Work Order ID: 125677

**\*125677\***

Parent Item: D407-667-205TRN

**\*D407-667-205TRN\***

Parent Item Name: Crosstube Turning Detail

Start Date: 10/20/2014

Required Date: 10/20/2014

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 08-03-06 new issue DD verified by:ec  
IPP Rev B 08.04.02 Removed polish EC verified by: DD  
IPP Rev:C 08-08-19 revE as per dwg DD verified by:EC

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D6011-115                       |                        | Manufactured  | No          |                     |                  | 120             | Each               | 56.0000        | 1           | 1            |               |                |        |

**\*D6011-115\***

Crosstube Material

**\*\***

| <u>Location</u> | <u>Loc Qty</u> | <u>Loc Code</u> |
|-----------------|----------------|-----------------|
| LG              | 22             |                 |
| 107881          | 22             |                 |
| LG003           | 34             |                 |
| 107880          | 22             |                 |
| 67798           | 6              |                 |
| 75639           | 6              |                 |

|       |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

amm L 14/10/27

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

**FAULT CATEGORY**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                   |  |                     |              |
|---------------------------------------------------|--|---------------------|--------------|
| <b>DART AEROSPACE LTD</b>                         |  | <b>Work Order:</b>  | 125677       |
| <b>Description:</b> Crosstube Assembly            |  | <b>Part Number:</b> | D407-667-245 |
| <b>Inspection Dwg:</b> D407-667-245 <b>Rev:</b> F |  | <b>Page 1 of 2</b>  |              |

### FIRST ARTICLE INSPECTION CHECKLIST

|        | Inspection Sheet<br>Drawing Dimension | Tolerance     | Actual<br>Dimension | Accept | Reject | Method of<br>Inspection | Comments |
|--------|---------------------------------------|---------------|---------------------|--------|--------|-------------------------|----------|
| SIDE A | 2.490                                 | +0.005/-0.000 | 2.274               | /      |        | vern                    | CNC-08   |
|        | 1.832                                 | +0.005/-0.000 | 1.836               | /      |        |                         |          |
|        | 1.838                                 | +0.005/-0.000 | 1.842               | /      |        |                         |          |
|        | 1.892                                 | +0.005/-0.000 | 1.897               | /      |        |                         |          |
|        | 2.052                                 | +0.005/-0.000 | 2.055               | /      |        |                         |          |
|        | 2.206                                 | +0.005/-0.000 | 2.208               | /      |        |                         |          |
|        | 2.521                                 | +0.005/-0.000 | 2.523               | /      |        |                         |          |
|        | 2.633                                 | +0.005/-0.000 | 2.633               | /      |        |                         |          |
|        | 4.10                                  | +/-0.030      | 4.10                | /      |        | vern                    | CNC-08   |
|        | 4.978                                 | +/-0.030      | 4.980               | /      |        |                         |          |
|        | 2.040                                 | +0.000/-0.010 | 2.038               | /      |        |                         |          |
|        | 0.125                                 | +/-0.010      | .125                | /      |        |                         |          |
|        | R0.063                                | +/-0.010      | .063                | /      |        | RG                      |          |
|        | R0.500                                | +/-0.010      | .500                | /      |        | "                       |          |
|        | 2.490                                 | +0.005/-0.000 |                     |        |        | vern                    | CNC-08   |
|        | 1.832                                 | +0.005/-0.000 |                     |        |        |                         |          |
| SIDE B | 1.838                                 | +0.005/-0.000 |                     |        |        |                         |          |
|        | 1.892                                 | +0.005/-0.000 |                     |        |        |                         |          |
|        | 2.052                                 | +0.005/-0.000 |                     |        |        |                         |          |
|        | 2.206                                 | +0.005/-0.000 |                     |        |        |                         |          |
|        | 2.521                                 | +0.005/-0.000 | 2.524               | /      |        |                         |          |
|        | 2.633                                 | +0.005/-0.000 | 2.633               | /      |        |                         |          |
|        | 4.10                                  | +/-0.030      | 4.10                | /      |        | vern                    | CNC-08   |
|        | 4.978                                 | +/-0.030      |                     |        |        |                         |          |
|        | 2.040                                 | +0.000/-0.010 | 2.038               | /      |        |                         |          |
|        | 0.125                                 | +/-0.010      | .125                | /      |        |                         |          |
|        | R0.063                                | +/-0.010      | .063                | /      |        | RG                      |          |
|        | R0.500                                | +/-0.010      |                     |        |        | "                       |          |
|        | 112.91                                | +/-0.020      | 112.920             | ✓      |        | tape                    | LG-11    |
|        |                                       |               |                     |        |        |                         |          |
|        |                                       |               |                     |        |        |                         |          |
|        |                                       |               |                     |        |        |                         |          |

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

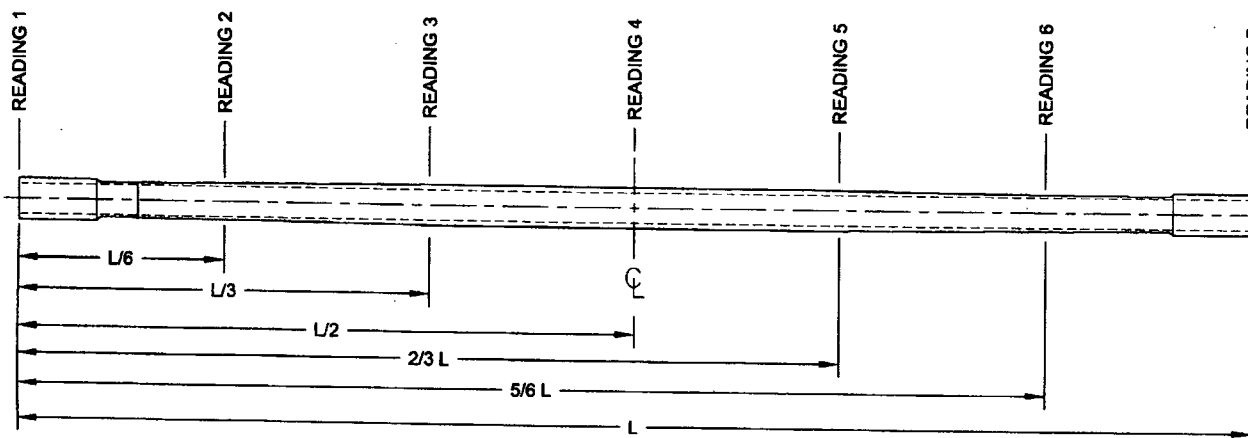
| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                            |  |                                  |
|--------------------------------------------|--|----------------------------------|
| <b>DART AEROSPACE LTD</b>                  |  | <b>Work Order:</b> 125677        |
| <b>Description:</b> Crosstube Assembly     |  | <b>Part Number:</b> D407-667-245 |
| <b>Inspection Dwg:</b> D407-667-245 Rev: F |  | <b>Page 2 of 2</b>               |

### WALL THICKNESS MEASUREMENT



| Location             | WALL THICKNESS MEASUREMENT (IN) |    |    |    | Deviation<br>$\Delta w$<br>(max-min) | TOLERANCE |
|----------------------|---------------------------------|----|----|----|--------------------------------------|-----------|
|                      | w1                              | w2 | w3 | w4 |                                      |           |
| READING 1<br>L = 0"  |                                 |    |    |    |                                      | 0.075"    |
| READING 2<br>L = 18  |                                 |    |    |    |                                      |           |
| READING 3<br>L = 38  |                                 |    |    |    |                                      |           |
| READING 4<br>L = 56  |                                 |    |    |    |                                      |           |
| READING 5<br>L = 74  |                                 |    |    |    |                                      |           |
| READING 6<br>L = 94  |                                 |    |    |    |                                      |           |
| READING 7<br>L = 112 |                                 |    |    |    |                                      |           |

#### Calibration Result

Actual Block Thickness: .100 .750

Sitiescan 250 Measured Thickness: .100 .750

|              |             |                       |
|--------------|-------------|-----------------------|
| Measured by: | Audited by: | Preliminary Approval: |
| Date:        | Date:       | Date:                 |

| Rev | Date     | Change                                | Revised by | Approved |
|-----|----------|---------------------------------------|------------|----------|
| A   | 04.04.21 | New Issue (P/O D407-667-205)          | KJ/RF      |          |
| B   | 06.03.09 | Dwg Rev updated                       | KJ/JLM     |          |
| C   | 06.03.30 | Tolerance revised for 4.978 dimension | KJ/JLM     |          |
| D   | 07.02.19 | Dwg Rev updated                       | KJ/JLM     |          |
| E   | 09.05.20 | Dwg Rev updated                       | KJ         |          |
| F   | 12.06.04 | Wall thickness form added             | KJ         |          |

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Item | QTY<br>-245 | PART NUMBER    | DESCRIPTION                                                                                                    |
|------|-------------|----------------|----------------------------------------------------------------------------------------------------------------|
| 1    | X           | D407-667-245   | CROSSTUBE ASSEMBLY (407 HIGH AFT)                                                                              |
| 2    | 1           | D6011-115      | CROSSTUBE                                                                                                      |
| 3    | 2           | D2856-400-773  | ABRASION STRIP                                                                                                 |
| 4    | 2           | D2873-043      | NUT PLATE                                                                                                      |
| 5    | 2           | D2873-045      | NUT PLATE                                                                                                      |
| 6    | 1           | D2894-1        | SUPPORT                                                                                                        |
| 7    | 2           | D3190-1        | CHAFING SHIELD                                                                                                 |
| 8    | 2           | D3595-063-430  | RUBBER CUSHION                                                                                                 |
| 9    | 14          | MS20601AD4W8   | RIVET (OR NAS9302B-4-8)                                                                                        |
| 10   | 4           | MS21920-22     | CLAMP                                                                                                          |
| 11   | 2           | MS21920-25     | CLAMP (OR MS21920-24)                                                                                          |
| 12   | A/R         | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023<br>ADHESIVE (TEXTRON/BELL SPEC. 299-947-<br>100, TYPE II, CLASS 2 ADHESIVE) |

#### GENERAL NOTES:

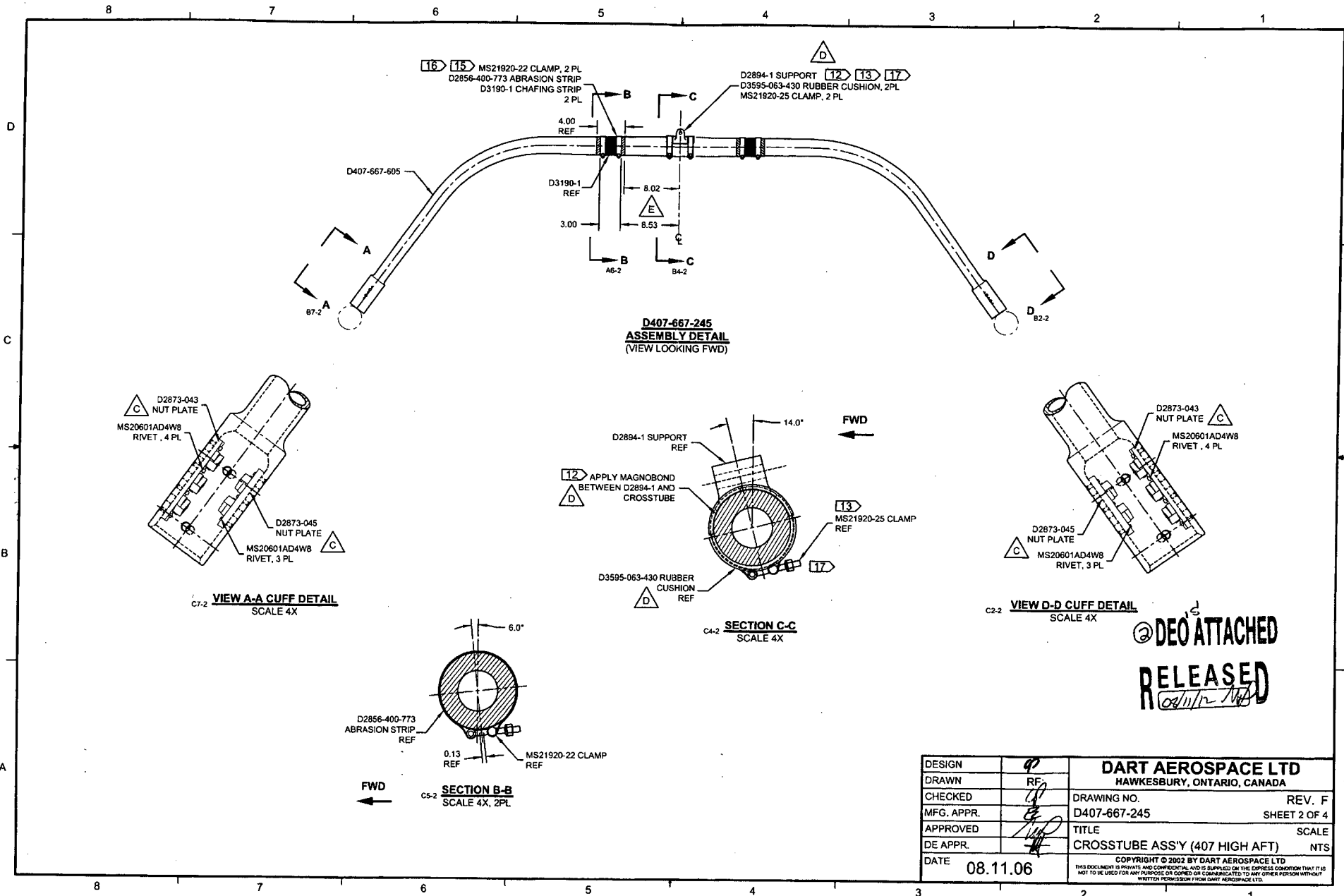
- MATERIAL: MANUFACTURED FROM D6011-115  
FINISHED LENGTH = 112.91±0.020
- FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- UNITS: INCHES UNLESS OTHERWISE NOTED.
- BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- IDENTIFICATION: SCRIBE DART PART NUMBER "D407-667-245" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- WEIGHT: 27.7 lbs
- PART IS SYMMETRIC ABOUT CENTERLINE.
- RUN-OFF PART. BLEND OUT EDGE LONGITUDINALLY. TRANSITION SHOULD BE SMOOTH.
- BEND PROGRESSIVELY WITH A MINIMUM OF 6 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- INSTALL D2894-1 CENTER SUPPORT USING A 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- INSTALL MS21920-25 CLAMPS WITH D3595-063-430 RUBBER CUSHIONS TO SECURE D2894-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE CROSSTUBE SUPPORT.  
NOTE: MS21920-24 CLAMPS CAN BE USED TO ACCOMMODATE VARYING DIAMETERS. ENSURE THERE IS A MINIMUM OF 1.5 THREADS IN SAFETY ON THE NUTS.
- EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- INSTALL D2856-400-773 ABRASION STRIP WITH A 0.13 (REF) GAP ON BOTTOM SIDE OF CROSSTUBE, PER QSI 035.
- INSTALL D3190-1 CHAFING SHIELDS SO THAT OVERLAP IS ON BOTTOM SIDE OF CROSSTUBE OPPOSITE D2894-1 SUPPORT.
- TORQUE CLAMPS 80 TO 100 IN.-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO 125.677. MJS  
14-10-20

DEO ATTACHED

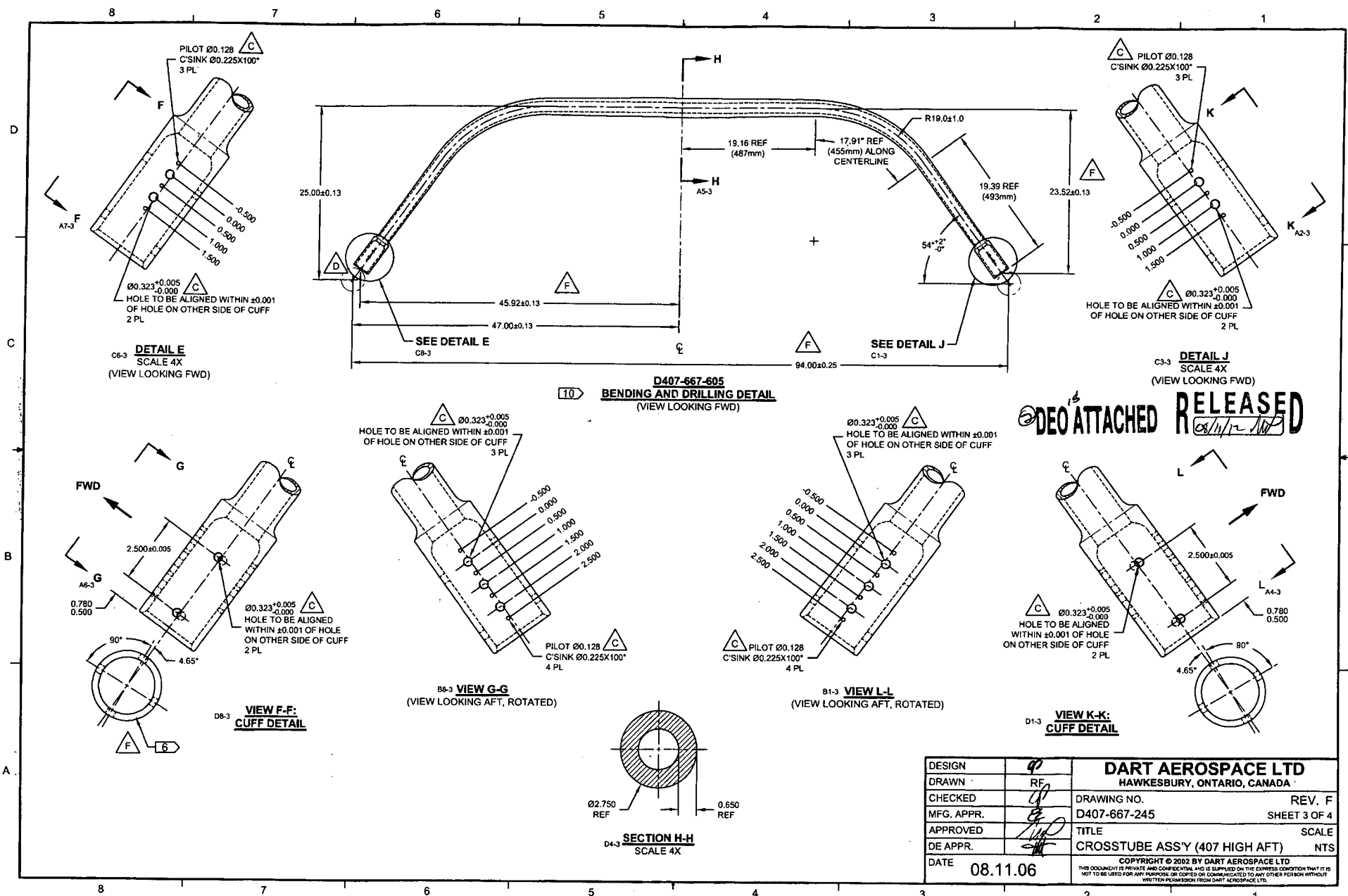
RELEASED  
08/11/06

|            |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| F          | REFORMAT NOTES TO NEW STANDARDS (ZN B8-1);<br>RELOCATED FLAG # 6 (ZN A8-3) PER NCR 210;<br>REMOVED REF. & ADD TOLERANCES (ZN C6-3, C4-3 &<br>D2-3)                                                                                                | RF                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 08.11.06 |
| E          | 8.02 AND 8.53 WERE 8.40 AND 8.90 (ZN D5-2);<br>REORGANIZED VIEWS AND REFORMATED DRAWING<br>TO CURRENT STANDARDS.<br>REASONS: CLAMPS MOVED 0.375 TOWARD CL TO<br>ELIMINATE INTERFERENCE WITH AIRCRAFT MOUNTS.<br>REFERENCE: PAR#08-21 AND ECR#1225 | MB                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 08.07.24 |
| D          | ADD VIEW FOR OEM SKID HOLES, ROTATE<br>ORIENTATION OF CLAMPS SECTION F-F, REMOVE<br>-851 ABRASION STRIP, ADD MAGNOBOND 6398, ADD<br>CUSHION                                                                                                       | PH                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 07.02.07 |
| C          | ADD HOLES AND NUT PLATES FOR<br>COMPATIBILITY WITH BHT/AA SKIDTUBES                                                                                                                                                                               | PH                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 05.07.26 |
| B          | ADD CHAFING SHIELD                                                                                                                                                                                                                                | CP                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 03.05.21 |
| A          | NEW ISSUE                                                                                                                                                                                                                                         | CP                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 02.05.13 |
| REV.       | DESCRIPTION                                                                                                                                                                                                                                       | BY                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DATE     |
| DESIGN     | RF                                                                                                                                                                                                                                                | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA<br><br>DRAWING NO. REV. F<br>D407-667-245 SHEET 1 OF 4<br><br>TITLE SCALE<br>CROSSTUBE ASS'Y (407 HIGH AFT) NTS<br><br>COPYRIGHT © 2002 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br>NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br>WRITTEN PERMISSION FROM DART AEROSPACE LTD. |          |
| DRAWN      | RF                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
| CHECKED    | RF                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
| MFG. APPR. | RF                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
| APPROVED   | RF                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
| DE APPR.   | RF                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |
| DATE       | 08.11.06                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |



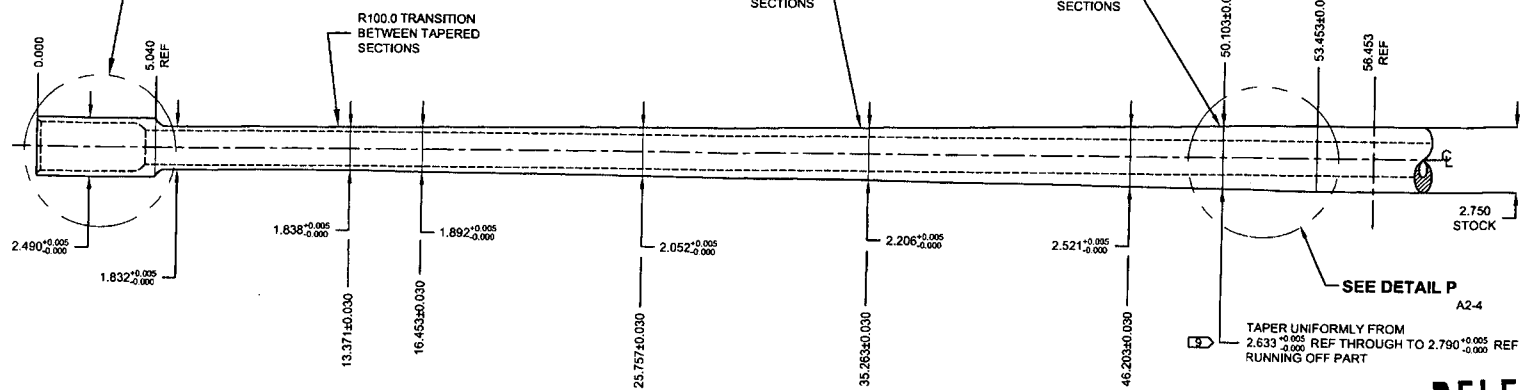
2 DEO ATTACHED  
RELEASED  
08/11/06





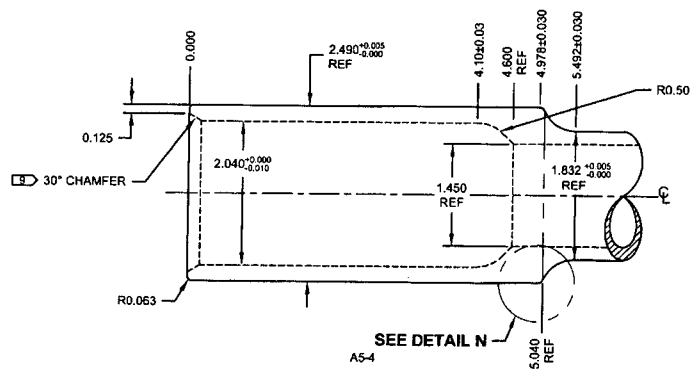
|            |          |                                                                                                                                                                                                                                                                                |              |
|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | RF       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                      |              |
| DRAWN      | RF       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                    |              |
| CHECKED    | RF       | DRAWING NO.                                                                                                                                                                                                                                                                    | REV. F       |
| MFG. APPR. | RF       | D407-667-245                                                                                                                                                                                                                                                                   | SHEET 3 OF 4 |
| APPROVED   | RF       | TITLE                                                                                                                                                                                                                                                                          | SCALE        |
| DE APPR.   | RF       | CROSSTUBE ASS'Y (407 HIGH AFT)                                                                                                                                                                                                                                                 | NTS          |
| DATE       | 08.11.06 | COPYRIGHT © 2002 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br>NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br>WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

SEE DETAIL M  
A7-4

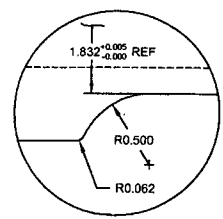


**D407-667-245 MACHINING DETAIL**

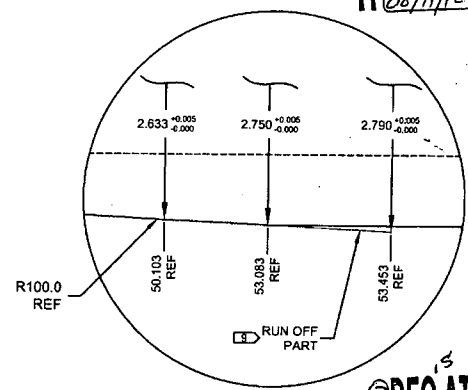
**RELEASED**  
08/11/12



**DETAIL M: CROSSTUBE CUFF**  
SCALE 3X



**DETAIL N: CUFF TRANSITION**  
SCALE 2X



**DETAIL P: TAPER RUN-OFF**  
NOT TO SCALE

**DEO'S ATTACHED**

|            |          |                                                                                                                                                                                                                                                                                           |              |
|------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | 90       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                                 |              |
| DRAWN      | RF       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                               |              |
| CHECKED    | JP       | DRAWING NO.                                                                                                                                                                                                                                                                               | REV. F       |
| MFG. APPR. | JP       | D407-667-245                                                                                                                                                                                                                                                                              | SHEET 4 OF 4 |
| APPROVED   | JP       | TITLE                                                                                                                                                                                                                                                                                     | SCALE        |
| DE APPR.   | JP       | CROSSTUBE ASSY (407 HIGH AFT)                                                                                                                                                                                                                                                             | NTS          |
| DATE       | 08.11.06 | <small>COPYRIGHT © 2002 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |              |

|                             |                                        |               |                                         |  |                                |                           |              |
|-----------------------------|----------------------------------------|---------------|-----------------------------------------|--|--------------------------------|---------------------------|--------------|
| DRAWING NO.<br>D407-667-245 | TITLE<br>CROSSTUBE ASSY (407 HIGH AFT) | REV. F        | DART AEROSPACE LTD<br>ENGINEERING ORDER |  | D.E.O. NO.<br>D407-667-245-F-1 | SHEET NO.<br>SHEET 1 OF 2 | SCALE<br>NTS |
| DRAWN                       | CHECKED                                | MFG. APPR.    | APPROVED                                |  | DE APPR.                       |                           |              |
| DATE 11.04.08               | DATE 11.04.12                          | DATE 11.04.12 | DATE 11.04.12                           |  | DATE 11.04.12                  |                           |              |

**PURPOSE:**

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890.

**CHANGE:**

PARTS LIST IS AMENDED AS FOLLOWS:

**IS:**

| Item | Qty<br>-245 | Part Number   | Description    |
|------|-------------|---------------|----------------|
| 3    | 0           | D2856-400-773 | ABRASION STRIP |

**WAS:**

|   |   |               |                |
|---|---|---------------|----------------|
| 3 | 2 | D2856-400-773 | ABRASION STRIP |
|---|---|---------------|----------------|

NOTES 2 AND 15, SHEET 1 ARE AMENDED AS FOLLOWS:

**IS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
PAINT OUTSIDE PER DART QSI 005 4.2  
REMOVE MASKING AND APPLY CLEAR COAT
- 15) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3190-1  
CHAFING SHIELDS AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL  
PROSEAL D3190-1 CHAFING SHIELDS ONTO CROSSTUBE BY APPLYING A THIN COAT  
OF PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.

**WAS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 15) INSTALL D2856-400-773 ABRASION STRIP WITH A 0.13 REF GAP ON BOTTOM SIDE OF  
CROSSTUBE PER QSI 035.

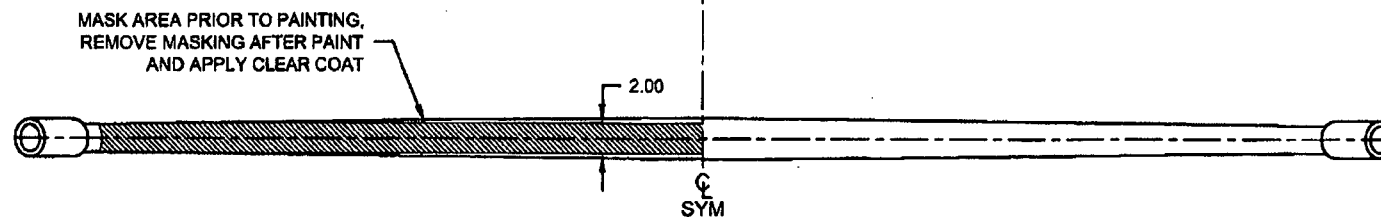
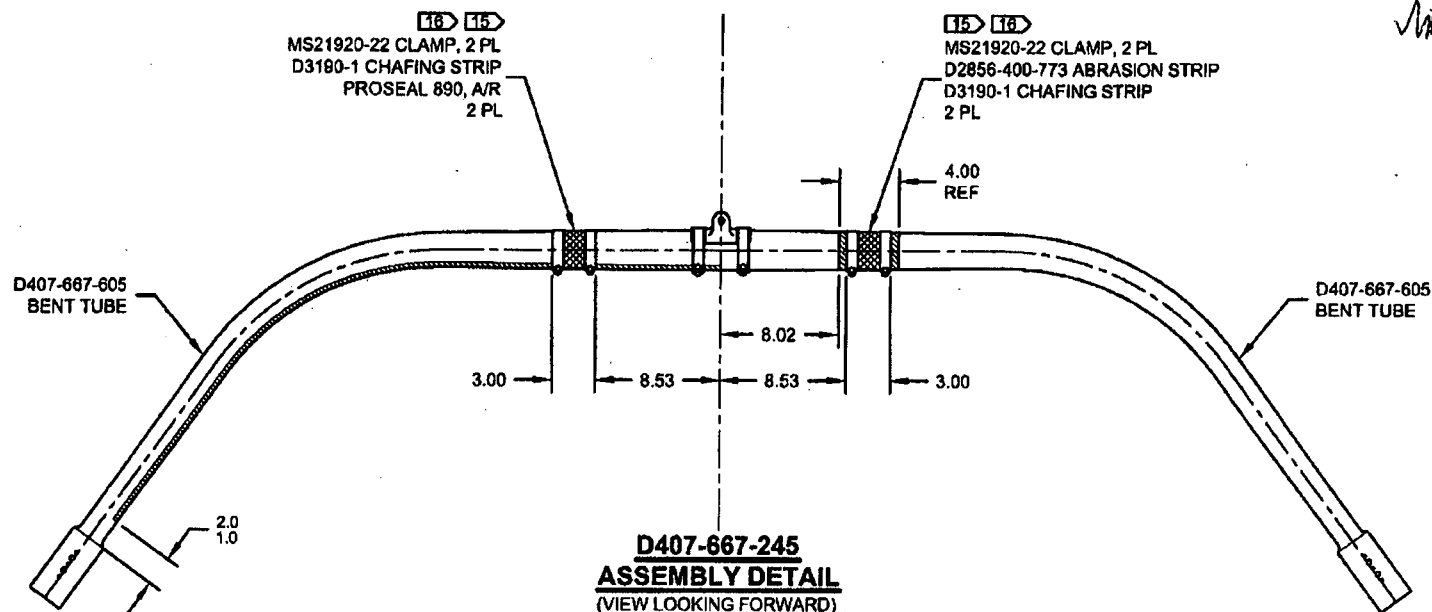
**RELEASED**  
2011-04-18  
*[Signature]*

|                             |                                        |               |                                         |  |                                |                           |              |
|-----------------------------|----------------------------------------|---------------|-----------------------------------------|--|--------------------------------|---------------------------|--------------|
| DRAWING NO.<br>D407-667-245 | TITLE<br>CROSSTUBE ASSY (407 HIGH AFT) | REV. F        | DART AEROSPACE LTD<br>ENGINEERING ORDER |  | D.E.O. NO.<br>D407-667-245-F-1 | SHEET NO.<br>SHEET 2 OF 2 | SCALE<br>NTS |
| DRAWN                       | CHECKED                                | MFG. APPR.    | APPROVED                                |  | DE APPR.                       |                           |              |
| DATE 11.04.08               | DATE 11.04.11                          | DATE 11.04.12 | DATE 11/04/12                           |  | DATE 11.04.12                  |                           |              |

IS:

WAS:

**RELEASED**  
2011-04-18



|                             |                                         |                         |                                                 |  |                                |                           |              |
|-----------------------------|-----------------------------------------|-------------------------|-------------------------------------------------|--|--------------------------------|---------------------------|--------------|
| DRAWING NO.<br>D407-667-245 | TITLE<br>CROSSTUBE ASS'Y (407 HIGH AFT) | REV. F                  | <b>DART AEROSPACE LTD<br/>ENGINEERING ORDER</b> |  | D.E.O. NO.<br>D407-667-245-F-2 | SHEET NO.<br>SHEET 1 OF 1 | SCALE<br>NTS |
| DRAWN<br><i>97</i>          | CHECKED<br><i>ASS</i>                   | MFG. APPR.<br><i>ES</i> | APPROVED<br><i>MP</i>                           |  | DE APPR.<br><i>MP</i>          |                           |              |
| DATE<br>11.09.07            | DATE<br>11.09.19                        | DATE<br>11.09.19        | DATE<br>11.09.19                                |  | DATE<br>11.09.19               |                           |              |

**PURPOSE:**

REPLACE MAGNOBOND WITH 3M DP460 SCOTCH-WELD EPOXY ADHESIVE

**CHANGE:**

IS:

| Item | Qty<br>-245 | Part Number       | Description                    |
|------|-------------|-------------------|--------------------------------|
| 12   | A/R         | SCOTCH-WELD DP460 | EPOXY ADHESIVE, 3M SCOTCH-WELD |

WAS:

|    |     |                |                                                                                                               |
|----|-----|----------------|---------------------------------------------------------------------------------------------------------------|
| 12 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023<br>ADHESIVE (TEXTRON/BELL SPEC. 299-947-100,<br>TYPE II, CLASS 2 ADHESIVE) |
|----|-----|----------------|---------------------------------------------------------------------------------------------------------------|

NOTE 12 & 17, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) INSTALL D2894-1 CENTER SUPPORT USING A 0.04" TO 0.07" THICK LAYER OF SCOTCH-WELD DP460 PER QSI 015. LET CURE FOR 24 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER ADHESIVE HAS CURED FOR 24 HOURS.

WAS:

- 12) INSTALL D2894-1 CENTER SUPPORT USING A 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

**RELEASED**  
2011-09-29  
*MP*

